



DILLARD
UNIVERSITY

EST. 1869

Dillard University Alumni Association

Dallas / Ft. Worth Chapter
P.O. Box 764055 Dallas, TX 75376

www.dfwdillardalumni.org
dfwdillardalumni@yahoo.com

2019 – 2020 Scholarship Application Form

For Internal Use Only:

Name: _____
Awarded: _____ Denied: _____
Amount: _____ Reason: _____
Academic Year: _____

General Instructions

1. Print legibly or type.
2. All documentation must be submitted with application, and must be in its original form. **Incomplete applications will not be considered or processed.**

Deadline

For scholarship consideration, this form and required documentation must be received or postmarked no later than **April 15, 2019**. Mail application and documentation materials to:

DFW Chapter Dillard University Alumni Association

P. O. Box 764055

Dallas, TX 75376-4055

Or

Email to:

dfwdillardalumni@yahoo.com

Eligibility Criteria

The student:

- is a Dallas/Fort Worth metropolitan area resident.
- must be currently enrolled or have documented proof of acceptance for enrollment at Dillard University for the 2019-2020 school term.
- has an overall high school or college GPA of 3.00 or higher on a 4-point scale. (The cumulative grade point average must be computed on a 4-point scale and on an un-weighted basis.)
- has a minimum combined score of 1200 SAT for all 3 parts, or
- has a minimum score of 20 on the ACT.

Documentation to be submitted with application

All applicants must submit:

- a completed Scholarship Application Form.
- an official transcript in a sealed envelope that must bear the official seal and/or signatures of that institution.
- a typed written essay consisting of 450 - 500 words on:
 - **New Entrants:**
 - Explain why you want to attend a Historical Black College or University (HBCU), particularly Dillard University.
 - **Returning Students: (Select One)**
 - If you had the authority to change Dillard University in a positive way, what specific changes would you make?
 - Select an existing, controversial, campus issue at Dillard University and suggest a solution.

Dillard University Alumni Association Dallas/Fort Worth Chapter
Scholarship Application Form
(Print or Type)

Section A

Name: _____ Date of Birth: _____

Email Address: _____

Gender: Male Female

Mailing Address: _____
Street City & State Zip Code

Telephone: _____ Permanent Address: _____

_____ Street City & State Zip Code

Telephone: _____

Returning Students

Classification: _____ Current Major GPA: _____ Current Cumulative GPA: _____

Major: _____ Expected Graduation Date: _____

Have you received a scholarship from the DFW Chapter before? Yes No

If yes: Amount awarded _____ Academic year(s) awarded _____

Entering Students

High School Name & Address: _____

_____ GPA: _____ SAT Scores: Verbal _____ Math _____ Total _____ ACT Score: _____

- A letter of recommendation from the school where the student is currently enrolled
- A letter of recommendation from a citizen in the community, including but not limited to a mentor, community or religious leader, organization leader or member, or a volunteer or work supervisor

Section B

(Attach additional sheets if necessary)

I. Academic Achievements:

List any accomplishments, honors, scholarships, and awards along with sponsor and date received.

Honors/Awards/Scholarships	Sponsor	Date Received

II. Extra-curricular Activities:

List academic organizations and activities in which you have participated in the last 4 years. (For example: Summer Enrichment Program, Boys & Girls Clubs of America, Athletics, and University Interscholastic League Competition)

From (Month/Year)	To (Month/Year)

III. Employment Activities:

List part-time, summer, and/or volunteer jobs or internships you have held.

Business Name	Position	From (Month/Year)	To (Month/Year)

IV. Community Based or Non-Profit Activities:

List any community organizations or activities in which you have been involved.

(For example: March of Dimes, Students Against Destructive Decisions (SADD), Runaway Hotline)

Name of Organization or Activity	Position	From (Month/Year)	To (Month/Year)

V. Financial Hardship that should be considered:
